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PTO/SB/21 (08-03)
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/792,100	
	Filing Date	March 3, 2004	
	First Named Inventor	MAIO	
	Art Unit		
	Examiner Name		
Total Number of Pages in This Submission	4	Attorney Docket Number	1610-100

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	No fees are believed due, but please charge any deficiencies to Deposit Account No. 50-0951.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Mark D. Passler, Registration No. 40,764 AKERMAN SENTERFITT
Signature	
Date	6-3-04

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Typed or printed name	Mark D. Passler		
Signature		Date	6-3-04

This collection of information is required by 37.CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of MAIO et al.

Application No. 10/792,100

Examiner:

Filed: March 3, 2004

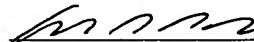
Group Art Unit:

For: COSMETIC COMPOSITION CONTAINING POLYISOPRENE

INFORMATION DISCLOSURE STATEMENT PURSUANT TO 37 CFR §1.97(b)

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Reg. No. 40,764
Mark D. Passler

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to the Duty to Disclose under 37 C.F.R. §1.56, the references cited on the accompanying form PTO/SB/08A are hereby brought to the attention of the Examiner for independent evaluation. In accordance with the Rules in effect for applications filed after June 30, 2003, copies of U.S. patents and/or patent application publications are not enclosed.

The submission of the listed documents is not intended as an admission that any such document constitutes prior art against the claims of the present application. Applicants do not waive any right to take any action that would be appropriate to antedate or otherwise remove any listed document as a competent reference against the claims of the present application.

Applicants respectfully request that the listed documents be considered by the Examiner and made of record in the present application and that an initialed copy of form PTO/SB/08A be returned in accordance with MPEP §609.

Certification

This Statement is being filed after the issuance of an Office Action in the present application, and this paper is thus submitted in accordance with 37 CFR 1.97(c). In view of the above statement, no fee is believed due, however, please charge any deficiencies or credit any overpayments to Deposit Account No. 50-0951.

Respectfully submitted,

Dated: 6-3-04



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Docket No. 1610-100

